

## APPEARANCE

# United States Bankruptcy Court

For the Northern District of Illinois

In re \_\_\_\_\_ )  
 ) Case No. \_\_\_\_\_  
 )  
 )

I, THE UNDERSIGNED, HEREBY FILE MY APPEARANCE AS ATTORNEY FOR

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Print Name on this Line  Firm Name

**Firm Name**

FIRM ID NUMBER:

FIRM ID NUMBER:

Signature

ATTORNEY ID NUMBER \_\_\_\_\_ Street Address \_\_\_\_\_

Street Address

Ch. 10: The U.S. and the World 27

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## Trial Attorneys\*

Print Name

\*Request is made for trial attorney to avoid possible conflicts in scheduling.

DATED:

TYPE OF DEFENSE COUNSEL:

CJA , RETAINED , SELF , NONE OTHER , PUB DEF

FOR OFFICE USE ONLY:

Party Code: P D TP